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PTO/SB/97 (08-00)
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Application Number: 09/752,114

Filing Date: December 28, 2000

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- 2. Fee Transmittal
- 3. Petition for Extension of Time
- 4. Notice of Appeal

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Under the Panerwork Reduction Act of 1995, no nersons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known pursuent to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 09/752,114 RECEIVED 12/28/2000 Filing Date CENTRAL FAX CENTER Galen C. Hunt First Named Inventor

For FY 2005 STEPHAN F WILLETT Examiner Name 🔟 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2142 **TOTAL AMOUNT OF PAYMENT** (\$) 950.00 MS1 - 523US Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Money Order Other (please identify): None Lee & Hayes, PLLC Deposit Account Deposit Account Number; For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES** EXAMINATION FEES Small Entity Small Entity **Small Entity** Fee (\$) Fees Paid (\$) Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Eee_(\$) Utility 300 150 500 100 250 Design 200 100 100 130 50 65 200 Plant 300 100 150 160 80 Reissue 300 150 500 250 รถก 300 **Provisional** 200 100 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Fee (5) 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 100 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 Multiple dependent claims 180 Total Claims Multiple Dependent Claims Extra Claims Fee (\$) Fee Paid (\$) 50 Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20 Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims 200 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small cntity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction theroof Fee (S) Fee Paid (\$) - 100 = / 50 = _ (round up to a whole number) x 4. OTHER FEE(8) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: Notice of Appeal (\$500), Extension for response within 2nd month (\$450)

SUBMITTED BY					
Signature	Lank & Bayer	Ja. 756 Tin R. Wyckoff	Registration No. (Attorney/Agent)	46175	Telephone (206) 315-4001
Name (Print/Type)	Tim R. Wyckoff	,			Date Octobor 6, 2005

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14, This collection is estimated to take 30 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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